



**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.: **CS90105**

First Inventor: Michael D. Kotzin

Title: A METHOD AND APPARATUS  
FOR DETERMINING CONTEXT  
OF A DEVICE

Express Mail Label No.: EL 977214449 US

**APPLICATION ELEMENTS**

(see MPEP chapter 600 concerning utility patent application contents)

- |   |  |
|---|--|
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br/>(Submit an original and a duplicate for fee processing)</p> <p>2. <input type="checkbox"/> Applicant claims small entity status<br/>See 37 CFR 1.27</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages <u>25</u>] <br/><i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> <li>-Descriptive title of the invention</li> <li>-Cross Reference to Related Applications</li> <li>-Statement Regarding Fed sponsored R &amp; D</li> <li>-Reference to sequence listing, a table, or computer program listing appendix</li> <li>-Brief Summary of the Invention</li> <li>-Brief Description of the Drawings (<i>if filed</i>)</li> <li>-Detailed Description</li> <li>-Claim(s)</li> <li>-Abstract of the Disclosure</li> </ul> </p> <p>4. <input checked="" type="checkbox"/> Informal Drawing(s) (35 U.S.C. 113) [Total Sheets <u>9</u>]</p> <p>5. Oath or Declaration [Total Sheets <u>3</u>]       <ul style="list-style-type: none"> <li>a. <input checked="" type="checkbox"/> Newly executed (original or copy)</li> <li>b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d))<br/>(for continuation/divisional with Box 18 completed)           <ul style="list-style-type: none"> <li>i. DELETION OF INVENTOR(S)<br/>Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)</li> </ul> </li> </ul> </p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> | <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence<br/>(if applicable, all necessary)       <ul style="list-style-type: none"> <li>a. <input type="checkbox"/> Computer Readable Form (CFR)</li> <li>b. <input type="checkbox"/> Specification Sequence Listing on:           <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-4 (2 copies); or</li> <li>ii. <input type="checkbox"/> Paper</li> </ul> </li> <li>c. <input type="checkbox"/> Statements verifying identity of above copies</li> </ul> </p> <p><b>ACCOMPANYING APPLICATION PARTS</b></p> <p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet &amp; document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br/>(when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input checked="" type="checkbox"/> Information Disclosure <u>5</u> Copies of IDS Statement (IDS)/PT-1449 Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br/>(Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p> |
|---|--|

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

Continuation     Divisional     Continuation-in- Part (CIP)    of prior application No. \_\_\_\_\_

Prior application information: Examiner: \_\_\_\_\_

Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number	20280	or	<input type="checkbox"/> Correspondence address below
Name			
Address			
City	State	Zip Code	
Country	Telephone	Fax	
Name	Registration No.		55,503
SIGNATURE	Date		31 MARCH 2004

CS90105

10/8/14370  
US PTO  
22387

033104

<b>FEE TRANSMITTAL</b>				Complete if Known																																																																																																																																																																																																																																																																																												
Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Application Number Filing Date First Named Inventor Examiner Name Group Art Unit																																																																																																																																																																																																																																																																																												
TOTAL AMOUNT OF PAYMENT		(\$1,004.00)		Attorney Docket No. CS90105																																																																																																																																																																																																																																																																																												
METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																																																																																																																																																																																												
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number <b>502117</b> Deposit Account Name <b>Motorola, Inc.</b>				<b>3. ADDITIONAL FEES</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Large Entity</th> <th style="text-align: left; width: 20%;">Small Entity</th> <th colspan="2"></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge – late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge – late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIR after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>2010</td><td>2255</td><td>1005</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive – unavoidable</td></tr> <tr><td>1453</td><td>1330</td><td>2453</td><td>665</td><td>Petition to revive – unintentional</td></tr> <tr><td>1501</td><td>1330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of IDS</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR § 1.129(a))</td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR § 1.129(b))</td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td></tr> <tr><td colspan="4">Other fee (specify) _____</td><td colspan="4"></td></tr> <tr> <td colspan="4" style="text-align: center; padding: 5px;">SUBTOTAL (1) (\$770.00)</td> <td colspan="4" style="text-align: center; padding: 5px;">SUBTOTAL (3) (\$40.00)</td> </tr> <tr> <td colspan="4" style="padding: 5px;">2. EXTRA CLAIM FEES</td> <td colspan="4" style="padding: 5px;">* Reduced by Basic Filing Fee Paid</td> </tr> <tr> <td colspan="4" style="padding: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Previously Paid**</th> <th style="text-align: left; width: 20%;">Extra Claims</th> <th style="text-align: left; width: 20%;">Fee from below</th> <th style="text-align: left; width: 20%;">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <td><b>26</b></td> <td><b>20</b></td> <td><b>108.</b></td> </tr> <tr> <th>Independent Claims</th> <td><b>4</b></td> <td><b>3</b></td> <td><b>86.</b></td> </tr> </thead> <tbody> <tr> <td colspan="4" style="text-align: center;">Multiple Dependent</td> </tr> </tbody> </table> </td> <td colspan="4" style="padding: 5px;"></td> </tr> <tr> <td colspan="4" style="padding: 5px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Large Entity</th> <th style="text-align: left; width: 20%;">Small Entity</th> <th style="text-align: left; width: 20%;">Entity</th> <th style="text-align: left; width: 20%;">Fee Description</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th></th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9 Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42 Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140 Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42 * Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9 *Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table> </td> <td colspan="4" style="padding: 5px;"></td> </tr> <tr> <td colspan="4" style="text-align: center; padding: 5px;">SUBTOTAL (2) (\$194.00)</td> <td colspan="4" style="text-align: center; padding: 5px;">SUBTOTAL (3) (\$40.00)</td> </tr> <tr> <td colspan="4" style="padding: 5px;">* or number previously paid, if greater; For Reissues, see above.</td> <td colspan="4" style="padding: 5px;">Complete (if applicable)</td> </tr> <tr> <td colspan="4" style="padding: 5px;">SUBMITTED BY</td> <td colspan="4" style="padding: 5px;"></td> </tr> <tr> <td colspan="2" style="padding: 5px;">Name (Print/Type)</td> <td colspan="2" style="padding: 5px;">David S. Noskowicz</td> <td colspan="2" style="padding: 5px;">Registration No.</td> <td colspan="2" style="padding: 5px;">Telephone</td> </tr> <tr> <td colspan="2" style="padding: 5px;">Signature</td> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">Date</td> </tr> <tr> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;"></td> <td colspan="2" style="padding: 5px;">31 MARCH 2004</td> </tr> </tbody></table>				Large Entity	Small Entity			Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	1051	130	2051	65	Surcharge – late filing fee or oath	1052	50	2052	25	Surcharge – late Provisional filing	1053	130	1053	130	Non-English specification	1812	2520	1812	2520	For filing a request for ex parte Reexamination	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action	1251	110	2251	55	Extension for reply within first month	1252	420	2252	210	Extension for reply within second month	1253	950	2253	475	Extension for reply within third month	1254	1480	2254	740	Extension for reply within fourth month	1255	2010	2255	1005	Extension for reply within fifth month	1401	330	2401	165	Notice of Appeal	1402	330	2402	165	Filing a brief in support of an appeal	1403	290	2403	145	Request for oral hearing	1451	1510	1451	1510	Petition to institute a public use proceeding	1452	110	2452	55	Petition to revive – unavoidable	1453	1330	2453	665	Petition to revive – unintentional	1501	1330	2501	665	Utility issue fee (or reissue)	1502	480	2502	240	Design issue fee	1503	640	2503	320	Plant issue fee	1460	130	1460	130	Petitions to the Commissioner	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	1806	180	1806	180	Submission of IDS	8021	40	8021	40	Recording each patent assignment per property (times number of properties)	1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	1801	770	2801	385	Request for Continued Examination (RCE)	1802	900	1802	900	Request for expedited examination of a design application	Other fee (specify) _____								SUBTOTAL (1) (\$770.00)				SUBTOTAL (3) (\$40.00)				2. EXTRA CLAIM FEES				* Reduced by Basic Filing Fee Paid				<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Previously Paid**</th> <th style="text-align: left; width: 20%;">Extra Claims</th> <th style="text-align: left; width: 20%;">Fee from below</th> <th style="text-align: left; width: 20%;">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <td><b>26</b></td> <td><b>20</b></td> <td><b>108.</b></td> </tr> <tr> <th>Independent Claims</th> <td><b>4</b></td> <td><b>3</b></td> <td><b>86.</b></td> </tr> </thead> <tbody> <tr> <td colspan="4" style="text-align: center;">Multiple Dependent</td> </tr> </tbody> </table>				Previously Paid**	Extra Claims	Fee from below	Fee Paid	Total Claims	<b>26</b>	<b>20</b>	<b>108.</b>	Independent Claims	<b>4</b>	<b>3</b>	<b>86.</b>	Multiple Dependent								<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Large Entity</th> <th style="text-align: left; width: 20%;">Small Entity</th> <th style="text-align: left; width: 20%;">Entity</th> <th style="text-align: left; width: 20%;">Fee Description</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th></th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9 Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42 Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140 Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42 * Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9 *Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table>				Large Entity	Small Entity	Entity	Fee Description	Fee Code (\$)	Fee Code (\$)	Fee (\$)		1202	18	2202	9 Claims in excess of 20	1201	84	2201	42 Independent claims in excess of 3	1203	280	2203	140 Multiple dependent claim, if not paid	1204	84	2204	42 * Reissue independent claims over original patent	1205	18	2205	9 *Reissue claims in excess of 20 and over original patent					SUBTOTAL (2) (\$194.00)				SUBTOTAL (3) (\$40.00)				* or number previously paid, if greater; For Reissues, see above.				Complete (if applicable)				SUBMITTED BY								Name (Print/Type)		David S. Noskowicz		Registration No.		Telephone		Signature						Date								31 MARCH 2004	
Large Entity	Small Entity																																																																																																																																																																																																																																																																																															
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description																																																																																																																																																																																																																																																																																												
1051	130	2051	65	Surcharge – late filing fee or oath																																																																																																																																																																																																																																																																																												
1052	50	2052	25	Surcharge – late Provisional filing																																																																																																																																																																																																																																																																																												
1053	130	1053	130	Non-English specification																																																																																																																																																																																																																																																																																												
1812	2520	1812	2520	For filing a request for ex parte Reexamination																																																																																																																																																																																																																																																																																												
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action																																																																																																																																																																																																																																																																																												
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action																																																																																																																																																																																																																																																																																												
1251	110	2251	55	Extension for reply within first month																																																																																																																																																																																																																																																																																												
1252	420	2252	210	Extension for reply within second month																																																																																																																																																																																																																																																																																												
1253	950	2253	475	Extension for reply within third month																																																																																																																																																																																																																																																																																												
1254	1480	2254	740	Extension for reply within fourth month																																																																																																																																																																																																																																																																																												
1255	2010	2255	1005	Extension for reply within fifth month																																																																																																																																																																																																																																																																																												
1401	330	2401	165	Notice of Appeal																																																																																																																																																																																																																																																																																												
1402	330	2402	165	Filing a brief in support of an appeal																																																																																																																																																																																																																																																																																												
1403	290	2403	145	Request for oral hearing																																																																																																																																																																																																																																																																																												
1451	1510	1451	1510	Petition to institute a public use proceeding																																																																																																																																																																																																																																																																																												
1452	110	2452	55	Petition to revive – unavoidable																																																																																																																																																																																																																																																																																												
1453	1330	2453	665	Petition to revive – unintentional																																																																																																																																																																																																																																																																																												
1501	1330	2501	665	Utility issue fee (or reissue)																																																																																																																																																																																																																																																																																												
1502	480	2502	240	Design issue fee																																																																																																																																																																																																																																																																																												
1503	640	2503	320	Plant issue fee																																																																																																																																																																																																																																																																																												
1460	130	1460	130	Petitions to the Commissioner																																																																																																																																																																																																																																																																																												
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)																																																																																																																																																																																																																																																																																												
1806	180	1806	180	Submission of IDS																																																																																																																																																																																																																																																																																												
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																																																																																																																																																												
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))																																																																																																																																																																																																																																																																																												
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))																																																																																																																																																																																																																																																																																												
1801	770	2801	385	Request for Continued Examination (RCE)																																																																																																																																																																																																																																																																																												
1802	900	1802	900	Request for expedited examination of a design application																																																																																																																																																																																																																																																																																												
Other fee (specify) _____																																																																																																																																																																																																																																																																																																
SUBTOTAL (1) (\$770.00)				SUBTOTAL (3) (\$40.00)																																																																																																																																																																																																																																																																																												
2. EXTRA CLAIM FEES				* Reduced by Basic Filing Fee Paid																																																																																																																																																																																																																																																																																												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Previously Paid**</th> <th style="text-align: left; width: 20%;">Extra Claims</th> <th style="text-align: left; width: 20%;">Fee from below</th> <th style="text-align: left; width: 20%;">Fee Paid</th> </tr> <tr> <th>Total Claims</th> <td><b>26</b></td> <td><b>20</b></td> <td><b>108.</b></td> </tr> <tr> <th>Independent Claims</th> <td><b>4</b></td> <td><b>3</b></td> <td><b>86.</b></td> </tr> </thead> <tbody> <tr> <td colspan="4" style="text-align: center;">Multiple Dependent</td> </tr> </tbody> </table>				Previously Paid**	Extra Claims	Fee from below	Fee Paid	Total Claims	<b>26</b>	<b>20</b>	<b>108.</b>	Independent Claims	<b>4</b>	<b>3</b>	<b>86.</b>	Multiple Dependent																																																																																																																																																																																																																																																																																
Previously Paid**	Extra Claims	Fee from below	Fee Paid																																																																																																																																																																																																																																																																																													
Total Claims	<b>26</b>	<b>20</b>	<b>108.</b>																																																																																																																																																																																																																																																																																													
Independent Claims	<b>4</b>	<b>3</b>	<b>86.</b>																																																																																																																																																																																																																																																																																													
Multiple Dependent																																																																																																																																																																																																																																																																																																
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 20%;">Large Entity</th> <th style="text-align: left; width: 20%;">Small Entity</th> <th style="text-align: left; width: 20%;">Entity</th> <th style="text-align: left; width: 20%;">Fee Description</th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th>Fee (\$)</th> <th></th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9 Claims in excess of 20</td></tr> <tr><td>1201</td><td>84</td><td>2201</td><td>42 Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280</td><td>2203</td><td>140 Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84</td><td>2204</td><td>42 * Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9 *Reissue claims in excess of 20 and over original patent</td></tr> </tbody> </table>				Large Entity	Small Entity	Entity	Fee Description	Fee Code (\$)	Fee Code (\$)	Fee (\$)		1202	18	2202	9 Claims in excess of 20	1201	84	2201	42 Independent claims in excess of 3	1203	280	2203	140 Multiple dependent claim, if not paid	1204	84	2204	42 * Reissue independent claims over original patent	1205	18	2205	9 *Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																																																	
Large Entity	Small Entity	Entity	Fee Description																																																																																																																																																																																																																																																																																													
Fee Code (\$)	Fee Code (\$)	Fee (\$)																																																																																																																																																																																																																																																																																														
1202	18	2202	9 Claims in excess of 20																																																																																																																																																																																																																																																																																													
1201	84	2201	42 Independent claims in excess of 3																																																																																																																																																																																																																																																																																													
1203	280	2203	140 Multiple dependent claim, if not paid																																																																																																																																																																																																																																																																																													
1204	84	2204	42 * Reissue independent claims over original patent																																																																																																																																																																																																																																																																																													
1205	18	2205	9 *Reissue claims in excess of 20 and over original patent																																																																																																																																																																																																																																																																																													
SUBTOTAL (2) (\$194.00)				SUBTOTAL (3) (\$40.00)																																																																																																																																																																																																																																																																																												
* or number previously paid, if greater; For Reissues, see above.				Complete (if applicable)																																																																																																																																																																																																																																																																																												
SUBMITTED BY																																																																																																																																																																																																																																																																																																
Name (Print/Type)		David S. Noskowicz		Registration No.		Telephone																																																																																																																																																																																																																																																																																										
Signature						Date																																																																																																																																																																																																																																																																																										
						31 MARCH 2004																																																																																																																																																																																																																																																																																										

*\*\*or number previously paid, if greater; For Reissues, see above.*

**SUBMITTED BY**

**Complete (if applicable)**

Name (Print/Type) **David S. Noskowicz**

\* Reduced by Basic Filing Fee Paid

Registration No.	55.503	Telephone	847-523-2333
------------------	--------	-----------	--------------

21 MARCH 2004

Date

31 MARCH 2004

~~C890105~~